

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7169 OF 79583

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN NATIONAL COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
 federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8907172.21

Date of Receipt

11 / 06 / 2019

Transaction ID : SA11C.8367143570316

Amount of Each Receipt this Period

50.00

☒ Memo Item
 CONTRIBUTION

**TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OBRIEN, MATT, , ,

Mailing Address 1114 DINKEL CT

City
SAN JOSE

State
CA

Zip Code
95118-3757

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.50

Date of Receipt

11 / 06 / 2019

Transaction ID : SA11A.83675483

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
 federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

8907172.21

Date of Receipt

11 / 06 / 2019

Transaction ID : SA11C.8367143570325

Amount of Each Receipt this Period

50.00

☒ Memo Item
 CONTRIBUTION

**TOTAL EARMARKED THROUGH CONDUIT. PAC
 LIMIT NOT AFFECTED**

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►